

# 2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L05000001722

**FILED**  
**Apr 17, 2007**  
**Secretary of State**

**Entity Name:** REALTY OPTIONS UNLIMITED, LLC

**Current Principal Place of Business:**

1909 3RD STREET NORTH  
JACKSONVILLE BEACH, FL 32250

**New Principal Place of Business:**

14603 BEACH BOULEVARD  
SUITE 2000  
JACKSONVILLE, FL 32250

**Current Mailing Address:**

1909 3RD STREET NORTH  
JACKSONVILLE BEACH, FL 32250

**New Mailing Address:**

14603 BEACH BOULEVARD  
SUITE 2000  
JACKSONVILLE, FL 32250

**FEI Number:**                      **FEI Number Applied For ( )**                      **FEI Number Not Applicable (X)**                      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

**Name and Address of Current Registered Agent:**

FASANELLI, FABIO M  
1909 3RD STREET NORTH  
JACKSONVILLE BEACH, FL 32250    US

**Name and Address of New Registered Agent:**

FASANELLI, FABIO M  
14603 BEACH BOULEVARD  
SUITE 2000  
JACKSONVILLE, FL 32250 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: FABIO M. FASANELLI

04/17/2007

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title:                                      ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title:                      MM                      ( ) Change (X) Addition  
Name:                      FASANELLI, FABIO M  
Address:                      14603 BEACH BOULEVARD SUITE 2000  
City-St-Zip:                      JACKSONVILLE, FL 32250

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: FABIO M. FASANELLI

MM

04/17/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date